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FEDERAL EMERGENCY MANAGEMENT AGENCY NATIONAL FLOOD INSURANCE PROGRAM

O.M.B. No. 3067-0077

AM Expires July 31, 2002

## **ELEVATION CERTIFICATE**

Important: F	Read the Instructions on pages 1 - 7. PROPERTY OWNER INFORMATION	Par January Company Use:			
SECTION A	For Insurance Company Use:				
BUILDING OWNER'S NAME Mike Schmidder	Policy Number				
BUILDING STREET ADDRESS (Including Apt., Unit, Suite, and	t/or Bidg. No.) OR P.O. ROUTE AND BOX NO.	Company NAIC Number			
CITY Floor to #	STATE	ZIP CODE 8600/			
PROPERTY DESCRIPTION (Lot and Block Numbers, Tax Parcel Number, Legal Description, etc.)					
BUILDING USE (e.g., Residential, Non-fesidential, Addition, Accessory, etc. "Use Comments section in necessary.)					
LATITUDE/LONGITUDE (OPTIONAL) HORIZON ( ##" - ## - ## ###" or ## ####")     NAD 1927	TAL DATUM: SOURCE:   GPS (Type):_  _ NAD 1983   USGS Quad M	ap   Other:			
SECTION B - FLOOD INSURANCE RATE MAP (FIRM) INFORMATION					
B1. NEIP COMMUNITY NAME & COMMUNITY NUMBER Flagsfort Arzon 040020	B2. COUNTY NAME COCONINO	B3. STATE Arizona			
B4. MAP AND PANEL   B5. SUFFIX   B6. FIRM INDE   NUMBER   D4TE   D4TE	6 Avgust 2,1996 45	B9. BASE FLOOD ELEVATION(S) (Zone AO, use depth of flooding) 6890 · 8			
B10. Indicate the source of the Base Flood Elevation (BFE) data or base flood depth entered in B9.					
X  FIS Profile   FIRM  X  Commun B11. Indicate the elevation datum used for the BFE in BS	hity Determined   Other (Describe):	Describe):			
B11. Indicate the elevation datum used for the BPE in BS B12. Is the building located in a Coastal Barrier Resource	s System (CBRS) area or Otherwise Protected A	Area (OPA)?   Yes     No			
Designation Date:	os bysiciii (obine) area en barrer				
SECTION C - BUILDING ELEVATION INFORMATION (SURVEY REQUIRED)					
C1. Building elevations are based on:  _ Construction Drawings*      Building Under Construction*      Finished Construction					
C2. Building Diagram Number 8 (Select the building diagram most similar to the building for which this certificate is being completed - see					
pages 6 and 7. If no diagram accurately represents the building, provide a sketch or photograph.)					
CO Flouritions - Zones A1-A20, AE, AH, A (with BEE), VE, V1-V30, V (with BEE), AR, AR/A, AR/AE, AR/A1-A30, AR/AH, AR/AU					
Complete Home C3a, i below according to the building diagram specified in Item C2. State the catum used, if the catum is different nom-					
the datum used for the BFE in Section B, convert the datum to that used for the BFE. Show field measurements and datum conversion					
calculation. Use the space provided or the Comments area of Section D or Section G, as appropriate, to document the datum conversion.  Datum NEVD 1727 Conversion/Comments 769 of Cap = 6387. 91					
Elevation reference mark used Cof # /9/84/6 Does the elevation reference mark used appear on the FIRM?   Yes   No					
a) Top of bottom floor (including basement or end	closure) 6990 2 ft.(m)				
689.2 / ft (m) 9					
□ c) Bottom of lowest horizontal structural member (V zones only)					
□ d) Attached garage (top of slab)					
☐ e) Lowest elevation of machinery and/or equipment					
	servicing the building  AJ/Aft.(m)				
© f) Lowest adjacent grade (LAG)  © g) Highest adjacent grade (HAG)  © 1.L(m) 2 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0					
☐ h) No. of permanent openings (flood vents) withi	n 1 ft. above adjacent grade 6				
☐ i) Total area of all permanent openings (flood ve	nts) in C3hsq. in. (sq. cm)	- CONA			
SECTION D - SURVEYOR, ENGINEER, OR ARCHITECT CERTIFICATION					
This certification is to be signed and sealed by a land surveyor, engineer, or architect authorized by law to certify elevation information.					
Logitify that the information in Sections A. B. and C on this certificate represents my best efforts to interpret the data available.					
I understand that any false statement may be punishable by fine or imprisonment under 18 U.S. Code, Section 1001.					
Chas J Franks Arizon RLS 22258					
TITLE SURVEYOR	COMPANY NAME				
ADDRESS 1810 N Baylor Road	Playstatt SA	ZIP CODE			
SIGNATURE CALL	3730/00 SZO	77740473			
FEMA Form 81-31, AUG 99 SEF R	EVERSE SIDE FOR CONTINUATION RI	PLACES ALL PREVIOUS EDITIONS			

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IMPORTANT: In these spaces, con-	y the corresponding information fro	om Section A.	For Insurance Company Use:	
BUILDING STREET ADDRESS (Including	Apt., Unit, Suite, and/or Bldg. No.) OR P.C	D. ROUTE AND BOX NO.	Policy Number	
CITY Flassiaff	ŞTATE	ZIP CODE 8600 /	Company NAIC Number	
SECTION D	- SURVEYOR, ENGINEER, OR ARC		ITINUED)	
Copy both sides of this Elevation Cert	tificate for (1) community official, (2) in	nsurance agent/company, and (	3) building owner.	
COMMENTS				
			Check here if attachments	
THE PARTY OF THE P	TION INFORMATION (SURVEY NO	REQUIRED) FOR ZONE AO		
For Zone AO and Zone A (without BFE	Complete Items E1 through E4. If	the Elevation Certificate is Inter	ded for use as supporting	
Parametica for a LOMA and AMP E. S.	Section C must be completed			
E4 Building Diagram Number (	(Select the building diagram most sim	ilar to the building for which this	certificate is being completed -	
see pages 6 and 7. If no diagram	accurately represents the building, pl	rovide a sketch or photograph.)	In.(cm)    above or    below	
E2. The top of the bottom floor (includ (check one) the highest adjacent	orada			
E3. For Building Diagrams 6-8 with op	penings (see page 7), the next higher:	floor or elevated floor (elevation	b) of the building is	
_  ft.(m)   _ in.(cm) above E4. For Zone AQ only. If no flood dep	the highest adjacent grade.	oo bottom floor elevated in acco	dance with the community's	
floodolain management ordinance	e? IYes I No I Unknown.	The local official must certify to	is information in Section 6.	
SECTION F	- PROPERTY OWNER (OR OWNER	'S REPRESENTATIVE) CERTI	FICATION	
The property owner or owner's author	orized representative who completes 5	Sections A, B, and E for Zone A	(without a FEMA-issued or	
community-issued BFE) or Zone AQ	must sign here,- /			
PROPERTY OWNER'S OR OWNER'S A	Chas J Franks uthorized representative's NAM	E		
3800 Mallard La	CITY	STATE	ZIP CODE	
ADDRESS Flass to			HONE	
SIGNATURE O	<u> </u>		0774 0473	
COMMENTS				
			Check here if attachments	
	SECTION G - COMMUNITY INF	ORMATION (OPTIONAL)		
The local official who is authorized by	law or ordinance to administer the co	ommunity's floodplain managem	ent ordinance can complete	
Sections A, B, C (or E), and G of this Elevation Certificate. Complete the applicable item(s) and sign below.  G1.    The information in Section C was taken from other documentation that has been signed and embossed by a licensed surveyor,				
engineer, or architect who is authorized by state or local law to certify elevation information. (Indicate the source and date of the				
alayation data in the Comme	ints area helow \			
G2.   A community official complete	ed Section E for a building located in	Zone A (Without a FEMA-Issued	of community-issued by C/ or	
Zone AO.  G3.  The following information (Ite	ms G4-G9) is provided for community	y floodplain management purpo	S <del>e</del> s.	
	G5. DATE PERMIT ISSUED	G6. DATE CERTIFICATE (	OF COMPLIANCE/OCCUPANCY	
<u>849-0434</u>	08-10-99	stantial Improvement		
G7. This permit has been issued for: G8. Elevation of as-built lowest floor (	including besement) of the building is		ft.(m)Datum: NGVD	
G9. BFE or (in Zone AO) depth of floo	oding at the building site is:	<u>6890.8</u>	ft.(m)Datum: NGVP	
	M. GAVIGAH	TITLE STORAND	TER MYR.	
COMMUNITY NAME	ELACOTAFE		19-7650	
SIGNATURE	r calarir	DATE 65-31-0		
COMMENTS	<u>~</u>	03-31-0		
COMMENTO				
	A Marine Control of the Control of t		Check here if attachments	
FFMA Form 81-31 AUG 99	A	RFP	ACES ALL PREVIOUS EDITIONS	